# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 1 of 73 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No
Hill, Nicole M. Landing & Hill,	Michelle K.	Chapter 7
	Debtor(s)	
	VERIFICATION OF CRE	DITOR MATRIX
		Number of Creditors40
The above-named Debtor(s)	hereby verifies that the list of creditors	s is true and correct to the best of my (our) knowledge.
Date: <b>April 2, 2018</b>	/s/ Nicole M. Landing Hill	
	Debtor	
	/s/ Michelle K. Hill	
	Joint Debtor	

Advocate Dreyer 28582 Network Pl Chicago, IL 60673-1285

Advocate Il Masonic Med Center 22393 Network Pl Chicago, IL 60673-1223

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Aurora Radiology Consultants 520 E 22nd St Lombard, IL 60148-6110

Beharorial Health & Education Spec. c/o Certified Services Inc. PO Box 60079 Waukegan, IL 60079

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Comenity Bank/Anntylr PO Box 182273 Columbus, OH 43218-2273 Comenity Bank/Carsons PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Pier 1 PO Box 182789 Columbus, OH 43218-2789

Comenitybank/jcrew PO Box 182789 Columbus, OH 43218-2789

Comenitybank/kay 3100 Easton Square Pl Columbus, OH 43219-6232

Comenitybank/Ny&Co PO Box 182789 Columbus, OH 43218-2789

Credit One Bank NA PO Box 98875 Las Vegas, NV 89193-8875

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316 Dsnb Macys PO Box 8218 Mason, OH 45040-8218

Elan Financial Service PO Box 108 Saint Louis, MO 63166-0108

First America Bank PO Box 0794 Elk Grove Village, IL 60009

Frd Motor Cr PO Box BOX542000 Omaha, NE 68154

ICS., Inc. PO Box 1010 Tinley Park, IL 60477-9110

Illinois Department of Revenue 100 W Randolph St Ste C-300 Chicago, IL 60601-3218

Integrated Imaging Counsultants, LLC PO Box 95040 Chicago, IL 60694-5040

IRS PO Box 219236 Kansas City, MO 64121-9236

Kay Jewelers/Genesis PO Box 4485 Beaverton, OR 97076-4485

Malcolm S. Gerald & Assoc. 332 S Michigan Ave Ste 600 Chicago, IL 60604-4318

Massachusetts Dept. of Revenue PO Box 7089 Boston, MA 02204-7089

MBB PO Box 1219 Park Ridge, IL 60068-7219

Merrick Bank Corp PO Box 9201 Old Bethpage, NY 11804-9001

Military Credit Services, LLC 1150 E Little Creek Rd Ste 202 Norfolk, VA 23518-3826 Nordstrom/Td Bank USA 13531 E Caley Ave Englewood, CO 80111-6504

Pnc Bank, N.A. 1 Financial Pkwy Kalamazoo, MI 49009-8003

Rush Copley Medical Center PO Box 352 Aurora, IL 60507-0352

Syncb/gap PO Box 965005 Orlando, FL 32896-5005

Syncb/jcp PO Box 965007 Orlando, FL 32896-5007

Syncb/lowes PO Box 965005 Orlando, FL 32896-5005

Syncb/Sams Club PO Box 965005 Orlando, FL 32896-5005 Syncb/tjx Cos PO Box 965015 Orlando, FL 32896-5015

Syncb/Walmart PO Box 965024 Orlando, FL 32896-5024

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

US Dept of Ed/Glelsi 2401 International Ln Madison, WI 53704-3121

US Dept of Ed/Glelsi PO Box 7860 Madison, WI 53707-7860 B201B (Form 2018) (P2/198-09622

Doc 1 Filed 04/02/18

Entered 04/02/18 10:45:53

Desc Main

Document Page 8 of 73 United States Bankruptcy Court

### Northern District of Illinois, Eastern Division

IN RE:	Case No
Hill, Nicole M. Landing & Hill, Michelle K.	Chapter 7
Debtor(s)	*

	NOTICE TO CONSUMER DEBTOR( ) OF THE BANKRUPTCY CODE	(S)					
Certificate of [Non-Attorney] Bankruptcy Petition Preparer							
I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code.	the debtor's petition, hereby certify that I deli	ivered to the debtor the attached					
Printed Name and title, if any, of Bankruptcy Petition ProAddress:	petition pre the Social S principal, r the bankrup	parity number (If the bankruptcy eparer is not an individual, state Security number of the officer, esponsible person, or partner of otcy petition preparer.) by 11 U.S.C. § 110.)					
XSignature of Bankruptcy Petition Preparer of officer, prin partner whose Social Security number is provided above	acipal, responsible person, or	y 11 0.5.C. § 110.)					
Се	rtificate of the Debtor						
I (We), the debtor(s), affirm that I (we) have received an	d read the attached notice, as required by § 34.	2(b) of the Bankruptcy Code.					
Hill, Nicole M. Landing & Hill, Michelle K.	X /s/ Nicole M. Landing Hill	4/02/2018					
Printed Name(s) of Debtor(s)	Signature of Debtor	Date					
Case No. (if known)	X /s/ Michelle K. Hill	4/02/2018					
	Signature of Joint Debtor (if an	y) Date					

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 9 of 73

Fill in this infor	mation to identify your ca	se:		
Debtor 1	Nicole M. Landing			
Debtor 2	First Name  Michelle K. Hill	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRI	CT OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				Check if this is an amended filing
If you are an ind creditors have you have lea You must file th which the for	nt of Intention dividual filing under chapt we claims secured by your sed personal property and is form with the court with ever is earlier, unless the rm eople are filing together in ate the form.	er 7, you must fill ou property, or I the lease has not e in 30 days after you court extends the tin		for the meeting of creditors, creditors and lessors you list on ormation. Both debtors must sign
Part 1: List Y	your name and case numb  Your Creditors Who Have  tors that you listed in Part	er (if known). Secured Claims	editors Who Have Claims Secured by Property	
information b Identify the c	elow. reditor and the property tha		What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's   name:	First America Bank		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt	60538-5112	tgomery, IL	<ul> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	Yes ■
Creditor's	Frd Motor Cr		☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of property securing debt		WD	■ Retain the property and enter into a <i>Reaffirmation Agreement</i> .  □ Retain the property and [explain]:	Yes
Creditor's	Frd Motor Cr		☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	f 2016 Ford Escape A	WD	<ul> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	g ☐ Yes

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 10 of 73

Debtor 1 Debtor 2 Hill, Nicole M. Landing & Hill, Michelle K.	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Unexpir may assume an unexpired personal property lease if the tru	n Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in red leases are leases that are still in effect; the lease period has not yet ended. You stee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Under penalty of perjury, I declare that I have indicated my is property that is subject to an unexpired lease.  X /s/ Nicole M. Landing Hill Nicole M. Landing Hill Signature of Debtor 1	intention about any property of my estate that secures a debt and any personal  X /s/ Michelle K. Hill  Michelle K. Hill  Signature of Debtor 2
Date <b>April 2, 2018</b>	Date April 2, 2018

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 11 of 73

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

#### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exan licen Bring iden	e the name that is on government-issued ure identification (for nple, your driver's se or passport).  g your picture tification to your meeting the trustee.	Nicole M.  First name  Landing  Middle name  Hill  Last name and Suffix (Sr., Jr., II, III)	Michelle First name  K. Middle name  Hill Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ade your married or den names.	First Last Nikki Landing-Hill	
3.	youi num Indi	the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-1975	xxx-xx-6435

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 12 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)		
5. Where you live		2100 Chad Ln	If Debtor 2 lives at a different address:		
		Montgomery, IL 60538-5112  Number, Street, City, State & ZIP Code  Kendall  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 13 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Cha	pter 7					
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	– a If	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more detail about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
						sign and attach the Application for Individuals to Pay 7		
			J	Installments (Offici	,	only if you are filing for Chapter 7. By law, a judge may, l		
		n y	ot required to our family si	o, waive your fee, ze and you are una	and may do so only if your income	e is less than 150% of the official poverty line that applie. If you choose this option, you must fill out the <i>Applicat</i>		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.						
	an anniate?		Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence :	☐ Yes.	Has yo	our landlord obtair	ned an eviction judgment against	you?		
				No. Go to line 12	2.			
						dgment Against You (Form 101A) and file it as part of the		

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 14 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

Par	Report About Any Bus	sinesses \	You Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, St	ate & ZIP Code			
	to this petition.		Check the appropriate b	ox to describe your business:			
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the above	ve			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operations	re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ns, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	apter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable		What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Number, Street, City, State & Zip Code					

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 15 of 73

Debtor 1 Debtor 2

Part 5:

Hill, Nicole M. Landing & Hill, Michelle K.

Case number (if known)

15. Tell the court whether

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 16 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

Par								
16.	What kind of debts do you have?	16a.	Are your debts primarily con individual primarily for a person			defined in 11 U.S.C.§ 10	1(8) as "incurred by an	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.	☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consume	er debts or busin	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	1	<b>2</b> 5,001-50,	000	
	you estimate that you owe?	□ 50-99		<b>5001-10,000</b>		<b>5</b> 0,001-100		
	owe.	☐ 100-199		<b>1</b> 0,001-25,0	☐ 10,001-25,000 ☐ More than100,000		100,000	
		□ 200-9	99					
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,0	001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001 - \$100,000		<b>1</b> \$10,000,001			),001 - \$10 billion	
		\$100,001 - \$500,000			☐ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$5 ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion			
		□ \$500,001 - \$1 million		<b>—</b> \$100,000,001 - \$300 Hillion		i liviore trian	\$50 DIIIION	
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	□ \$500,000,0	001 - \$1 billion	
	estimate your liabilities to be?	<b>\$50,001 - \$100,000</b>		\$10,000,001			0,001 - \$10 billion	
		<b>\$100,001 - \$500,000</b>			☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		00,001 - \$50 billion \$50 billion	
		□ \$500,	001 - \$1 million	<b>—</b> \$100,000,00	) i - \$500 million	i in	\$50 DIIIION	
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, Unite States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Nicole M. Landing Hill /s/ Michelle K. Hill						
		Nicole	M. Landing Hill e of Debtor 1		Michelle K. Signature of D	Hill		
		Executed	April 2, 2018  MM / DD / YYYY		Executed on	April 2, 2018 MM / DD / YYYY		

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 17 of 73

Debtor	1	
Dabtar	2	

Hill, Nicole M. Landing & Hill, Michelle K.

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Darrell Jordan	Date	April 2, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
<b>5</b>		
Darrell Jordan		
Printed name		
Jordan Legal Group		
Firm name		
1999 W Galena Blvd Ste B		
Aurora, IL 60506-4305		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	djordan@djordanlegal.com
Darrell Jordan		
Bar number & State		

	Cas	se 18-0962	2 Doc 1 F	_	04/02/18 :ument	Entered 04/02/ Page 18 of 73	/18 10:45:53	Des	sc Mai	n
Fill	in this informa	ation to identify	your case and this							
Deb	otor 1	Nicole M. La	anding Hill							
Deb	otor 2	First Name  Michelle K.	Middle <b>Hill</b>	Name		Last Name				
(Spo	use, if filing)	First Name	Middle	Name		Last Name				
Unit	ted States Ban	kruptcy Court for	the: NORTHERI	N DIST	RICT OF ILLII	NOIS, EASTERN DIVISIO	DN			
Cas	se number					-				eck if this is an ended filing
_		m 106A/E <b>A/B: P</b> i	-							12/15
n ea hink nfori	ch category, se t it fits best. Be mation. If more ver every questi	parately list and d as complete and a space is needed, a on.	escribe items. List a accurate as possible attach a separate sho	. If two eet to th	married people nis form. On the	n asset fits in more than or are filing together, both ar top of any additional page on or Have an Interest In	e equally responsib	le for sup	plying cor	rrect
	_	, ,	uitable interest in an	y resid	ence, building,	land, or similar property?				
_	No. Go to Part 2									
	Yes. Where is	the property?								
1.1				What		/? Check all that apply	Do not do dunt o			ti Dut
	2100 Chad			■	Single-family  Duplex or mu	ti-unit building	Do not deduct s the amount of a	ny secured	d claims on	Schedule D:
	Street address, if	available, or other des	scription			or cooperative	Creditors Who I	Have Clain	is Secured	d by Property.
	Montgome		60538-5112		Land	or mobile home	Current value of entire property	?	portion	value of the you own?
	City	State	ZIP Code			operty	\$245,0	00.00		\$245,000.00
							Describe the n (such as fee si	-		•
				_		in the property? Check one	a life estate), if	known.		
	Kendall				20010 0,		_			
	County				Debtor 1 and	Debtor 2 only	<b>.</b>			
					At least one o	f the debtors and another	☐ Check if the (see instruction		munity pr	operty
					r information y erty identificati	ou wish to add about this it on number:	em, such as local			
				Prin	nary reside	nce				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

\$245,000.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....=>

Part 2: Describe Your Vehicles

Page 19 of 73 Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Make: Ford Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Fusion AWD** Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Year: 2017 Debtor 2 only Current value of the Current value of the 28000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$0.00 \$0.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Ford** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Escape AWD** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2016 Year: Debtor 2 only Current value of the Current value of the 30000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$11,269.00 \$11,269.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$11,269.00 .you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,000.00 Misc. household goods and furninshings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$250.00 1 computer, 4 tvs 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe.....

Case 18-09622

Doc 1

Filed 04/02/18

Entered 04/02/18 10:45:53

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Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Page 20 of 73 Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe..... necessary clothing \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No ■ Yes. Describe..... \$1,000.00 wedding rings 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 1 dog unknown 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$2,750.00 Part 3. Write that number here ...... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... cash on hand \$95.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

■ Yes.....

Institution name:

17.1. Checking Account Bank account @ First American Bank

\$100.00

Entered 04/02/18 10:45:53 Case 18-09622 Doc 1 Filed 04/02/18 Desc Main Page 21 of 73 Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you

= ...

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

		Case 18-09622	Doc 1	Filed 04/02/18 Document	Entered 04/02/18 10:45:53 Page 22 of 73	Desc Main
	otor 1 otor 2	Hill, Nicole M. Landi	ing & Hill, N	lichelle K.	Case number (if known)	
29.		support ples: Past due or lump sum	alimony, spou	usal support, child suppo	rt, maintenance, divorce settlement, property s	settlement
	No					
[	☐ Yes.	Give specific information				
30.		amounts someone owes y ples: Unpaid wages, disabilit		ayments, disability benefit	ts, sick pay, vacation pay, workers' compensati	on, Social Security benefits;
	_	unpaid loans you mad				
	■ No □ Yes.	Give specific information				
		·				
_		sts in insurance policies ples: Health, disability, or life	e insurance; he	ealth savings account (HS	SA); credit, homeowner's, or renter's insurance	
[	☐ Yes.	Name the insurance compa		icy and list its value.		
		Con	npany name:		Beneficiary:	Surrender or refund value:
32.	Any in	terest in property that is o	due vou from	someone who has died	1	
_	If you a died.				rance policy, or are currently entitled to receive p	property because someone has
	■ No	Give specific information				
	<b>_</b> 163.	Oive specific information				
_	Exam <sub>l</sub>	s against third parties, who ples: Accidents, employmen			or made a demand for payment to sue	
_	■ No □ ves	Describe each claim				
	Other o	contingent and unliquidat	ed claims of e	every nature, including	counterclaims of the debtor and rights to s	et off claims
		Describe each claim				
35.	Any fin	nancial assets you did not	already list			
_	■ No	,				
	☐ Yes.	Give specific information				
36.		the dollar value of all of your series that number here.		, ,	y entries for pages you have attached for	\$195.00
	_				'	
Par	t 5: De	escribe Any Business-Related	d Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
		own or have any legal or equ	itable interest i	in any business-related pr	operty?	
	_	o to Part 6. Go to line 38.				
_	<b>⊒</b> 165. €	30 to line 30.				
Par	4 G: Do	escribe Any Farm- and Comm	oroial Fishing	Polotod Proporty Vou Own	o ar Hove an Interest In	
i aii		you own or have an interest in f			i or mave an interest in.	
46.			equitable int	terest in any farm- or co	ommercial fishing-related property?	
	_	Go to Part 7.				
	⊔ Yes	s. Go to line 47.				
Par	t 7:	Describe All Property You	Own or Have a	an Interest in That You Did	Not List Above	
53.		u have other property of a ples: Season tickets, countr				
_	■ No	Give specific information				
L	<u> </u>	ONE SPECIAL HITOHITIALIUH				

Official Form 106A/B Schedule A/B: Property page 5

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 23 of 73

Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$245,000.00 56. Part 2: Total vehicles, line 5 \$11,269.00 Part 3: Total personal and household items, line 15 57. \$2,750.00 Part 4: Total financial assets, line 36 58. \$195.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$14,214.00 Copy personal property total \$14,214.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$259,214.00

Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Case 18-09622

		Docume	nt Page 24 of /3		
Fill in this infor	mation to identify your	case:			
Debtor 1	Nicole M. Landin	ng Hill			
	First Name	Middle Name	Last Name	)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVI	ISION	
Case number (if known)					☐ Check if this is an
					amended filing
					ű
Official Fo	rm 106C				

Literation than Brown and a View Obelow and Francisco

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

ГС	identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, even	if you	r spouse is filing with you.	
	■ You are claiming state and federal nonbank	ruptcy exemptions. 11	J.S.C	. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exer	npt, fi	ill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 1 Exemptions				
	2100 Chad Ln	\$245,000.00		\$30,000.00	735 ILCS 5/12-901
	Montgomery IL, 60538-5112 County: Kendall Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit	
	Misc. household goods and furninshings	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B. <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	1 computer, 4 tvs Line from Schedule A/B 7.1	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	necessary clothing Line from Schedule A/B 11.1	\$500.00	•	\$500.00	735 ILCS 5/12-1001(b)
	Line Hell Sollodate / VZ TTT			100% of fair market value, up to any applicable statutory limit	
	wedding rings Line from Schedule A/B 12.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)

100% of fair market value, up to any applicable statutory limit

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 25 of 73

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	cash on hand Line from Schedule A/B 16.1	\$95.00		\$95.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Bank account @ First American Bank	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 to No  □ Yes. Did you acquire the property covered □ No □ Yes	years after that for cases	s filed	, ,	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 26 of 73

Filli	in this inform	ation to identify your ca	ase:		
Deb	tor 1				
		First Name	Middle Name	Last Name	}
	tor 2	Michelle K. Hill			
(Spou	use if, filing)	First Name	Middle Name	Last Name	
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS, EASTERN DIVISION	
Cas	e number				
(if kno	own)				☐ Check if this is an amended filing
					, , , , , , , , , , , , , , , , , , ,
Off	icial For	m 106C			
Sc	hedule	C: The Pro	perty You Cla	im as Exempt	4/16
prope	erty you listed o	on Schedule A/B: Propen	y (Official Form 106A/B) as you	gether, both are equally responsible for sup ur source, list the property that you claim as cessary. On the top of any additional pages	s exempt. If more space is needed, fill
fund: to a p appli	s—may be un particular doll icable statuto	llimited in dollar amoun	t. However, if you claim an e e of the property is determir	h aids, rights to receive certain benefits exemption of 100% of fair market value on ned to exceed that amount, your exemp	under a law that limits the exemption
1. \	Which set of e	exemptions are you cla	iming? Check one only, even	if your spouse is filing with you.	
ı	■ You are clai	ming state and federal no	nbankruptcy exemptions. 11 l	U.S.C. § 522(b)(3)	
	☐ You are clai	ming federal exemptions.	11 U.S.C. § 522(b)(2)		
2. I	For any prope	erty you list on Schedu	e A/B that you claim as exer	mpt, fill in the information below.	
1	Brief descriptio	on of the property and line that lists this property	-	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Deb	otor 2 Exem	ptions			
-	Brief description	n:			
I	Line from Sche	edule A/B.		100% of fair market value, up to any applicable statutory limit	
	A				
			ption of more than \$160,375? very 3 years after that for cases	s filed on or after the date of adjustment.)	
	_	vou coquire the present :	powered by the everenties within	a 1 215 days before you filed this ser2	
		, , , , ,	overed by the exemption within	n 1,215 days before you filed this case?	
	□ No				
	11 70				

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 27 of 73 information to identify your case:

Fill in this information to iden	tify your case:		7 (71 71)		
	. Landing Hill			$\neg$	
First Name	Middle Name	Last Name			
Debtor 2 Michelle (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Cour	for the: NORTHERN DIST	RICT OF ILLINOIS, EAS	TERN DIVISION		
Case number (if known)					if this is an led filing
Official Form 106D					
Schedule D: Cred	itors Who Have C	laims Secure	ed by Property	y	12/15
_	fill it out, number the entries, and cured by your property?  ubmit this form to the court with	d attach it to this form. On	the top of any additional p	pages, write your name	
Yes. Fill in all of the information	mation below.				
Part 1: List All Secured Cla	ims		0.1	0.1	0.1
2. List all secured claims. If a cred for each claim. If more than one cremuch as possible, list the claims in		other creditors in Part 2. As	y Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 First America Bank	Describe the property t	hat secures the claim:	\$191,782.00	\$245,000.00	\$0.00
Creditor's Name	2100 Chad Ln, Mo 60538-5112	-			
PO Box 0794	Primary residence	the claim is: Check all that			
Elk Grove Village, IL	apply.	the claim is. Check all that			
60009	Contingent				
Number, Street, City, State & Zip	1				
Who owes the debt? Check one.	Disputed	Il that apply			
_	Nature of lien. Check a				
☐ Debtor 1 only ☐ Debtor 2 only	car loan)	ade (such as mortgage or se	ecurea		
_ ′		s tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only	· · ·				
☐ At least one of the debtors and a☐ Check if this claim relates to a	•				
community debt					
Date debt was incurred	Last 4 digits of a	account number 9650	<u> </u>		
2.2 Frd Motor Cr	Describe the property t	hat secures the claim:	\$32,173.00	\$0.00	\$32,173.00
Creditor's Name	2017 Ford Fusion	AWD			
PO Box BOX542000 Omaha, NE 68154	As of the date you file, apply.  Contingent	the claim is: Check all that			
Number, Street, City, State & Zip	Code Unliquidated Disputed				
Who owes the debt? Check one.	Nature of lien. Check a	Il that apply.			
☐ Debtor 1 only	_	ade (such as mortgage or so	ecured		
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such a	s tax lien, mechanic's lien)			
☐ At least one of the debtors and a	another	lawsuit			
☐ Check if this claim relates to a community debt					
Date debt was incurred 2017-	01 Last 4 digits of a	account number 8660	)		

## Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 28 of 73

Debtor 1 Nicole M. Landing Hill		Case number (f know)		
First Name Middle N	Name Last Name			
Debtor 2 Michelle K. Hill				
First Name Middle N	lame Last Name			
2.3 Frd Motor Cr	Describe the property that secures the claim:	\$26,525.00	\$11,269.00	\$15,256.00
Creditor's Name	2016 Ford Escape AWD			
DO Box DOVE 12000	As of the date you file, the claim is: Check all that			
PO Box BOX542000 Omaha, NE 68154	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
_	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or so car loan)	ecured		
Debtor 2 only	cai loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 2016-02	Last 4 digits of account number 1862			
2.4 Pnc Bank, N.A.	Describe the property that secures the claim:	\$266.00	\$0.00	\$266.00
2.4 Pnc Bank, N.A. Creditor's Name	Describe the property that secures the claim:	\$266.00	\$0.00	\$266.00
	Describe the property that secures the claim:	\$266.00	\$0.00	\$266.00
		\$266.00	\$0.00	\$266.00
Creditor's Name	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.	\$266.00	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy	As of the date you file, the claim is: Check all that	\$266.00	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI	As of the date you file, the claim is: Check all that apply.	\$266.00	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	<u>\$266.00</u>	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$266.00	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so		\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)		\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan) Statutory lien (such as tax lien, mechanic's lien)		\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)		\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	ecured	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or so car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	ecured	\$0.00	\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred 2010-05	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 3794	ecured		\$266.00
Creditor's Name  1 Financial Pkwy Kalamazoo, MI 49009-8003  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred 2010-05	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 3794	ecured		\$266.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main

		Document Page 29 of 73	
Fill in this infor	mation to identify your ca	se:	
Debtor 1	Nicole M. Landing	Hill	
	First Name	Middle Name Last Name	_
Debtor 2	Michelle K. Hill	Maria N	
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official For	m 106E/E		
	<del></del>	as Have Unassured Claims	12/15
		no Have Unsecured Claims Part 1 for creditors with PRIORITY claims and Part 2 for creditors wit	12/15
Schedule G: Exec D: Creditors Who	utory Contracts and Unexpir Have Claims Secured by Pro Page to this page. If you have	nat could result in a claim. Also list executory contracts on Schedule ad Leases (Official Form 106G). Do not include any creditors with par perty. If more space is needed, copy the Part you need, fill it out, nun no information to report in a Part, do not file that Part. On the top of	tially secured claims that are listed in Schedule ober the entries in the boxes on the left. Attach
Part 1: List A	All of Your PRIORITY Uns	ecured Claims	
1. Do any credi	tors have priority unsecured	claims against you?	
No. Go to	Part 2.		
☐ Yes.			
Part 2: List /	All of Your NONPRIORITY	Unsecured Claims	
	tors have nonpriority unsect	t. Submit this form to the court with your other schedules.	
unsecured cla	aim, list the creditor separately	ms in the alphabetical order of the creditor who holds each claim. If a or each claim. For each claim listed, identify what type of claim it is. Do not the other creditors in Part 3.If you have more than three nonpriority unsections.	t list claims already included in Part 1. If more
			Total claim
4.1 Advoc	ate Dreyer	Last 4 digits of account number 7292	unknown
Nonprior	ity Creditor's Name	When was the debt in surred?	
28582	Network PI	When was the debt incurred?	
	go, IL 60673-1285		
	Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.		
Debto	or 1 only	☐ Contingent	
☐ Debto	or 2 only	☐ Unliquidated	
☐ Debto	or 1 and Debtor 2 only	☐ Disputed	
☐ At lea	ast one of the debtors and anot	<u> </u>	
	k if this claim is for a comm		
debt	aim subject to offset?	Dobligations arising out of a separation agreement or direport as priority claims	vorce that you did not
■ No	a Subject to Offset?	Debts to pension or profit-sharing plans, and other sim	lar debts
☐ Yes			
<b>□</b> 162		Other. Specify	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 30 of 73

Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.2 Last 4 digits of account number **Advocate Dreyer** unknown Nonpriority Creditor's Name When was the debt incurred? 28582 Network PI Chicago, IL 60673-1285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **Advocate II Masonic Med Center** Last 4 digits of account number 9112 unknown Nonpriority Creditor's Name When was the debt incurred? 22393 Network PI Chicago, IL 60673-1223 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 Amex Last 4 digits of account number 9553 \$2,518.00 Nonpriority Creditor's Name When was the debt incurred? 2016-11 PO Box 297871 Fort Lauderdale, FL 33329-7871 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Open account ☐ Yes

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main

Document Page 31 of 73 Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.5 Last 4 digits of account number \$1,494.00 **Aurora Radiology Consultants** 9824 Nonpriority Creditor's Name When was the debt incurred? 520 E 22nd St Lombard, IL 60148-6110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Beharorial Health & Education** \$65.00 46 Spec. Last 4 digits of account number Nonpriority Creditor's Name c/o Certified Services Inc. When was the debt incurred? PO Box 60079 Waukegan, IL 60079 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Capital One** Last 4 digits of account number 2134 \$1,551.00 Nonpriority Creditor's Name When was the debt incurred? 2014-09 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving account

Is the claim subject to offset?

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 32 of 73

Canital One	Last 4 digits of account number	2024	\$94
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3824	<b>\$9</b> 4
,	When was the debt incurred?	2017-09	
15000 Capital One Dr			
Richmond, VA 23238-1119  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other. Specify Revolving		
	- Other. Specify		
Comenity Bank/Anntylr Nonpriority Creditor's Name	Last 4 digits of account number	7303	\$1,67
Nonpriority Creditor's Name	When was the debt incurred?	2015-07	
PO Box 182273			
Columbus, OH 43218-2273			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only			
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	a Claiiii.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Revolving	account	
Comenity Bank/Carsons	Last 4 digits of account number	7440	\$3,69
Nonpriority Creditor's Name	_		Ψ3,0.
PO Box 182789	When was the debt incurred?	2012-09	
Columbus, OH 43218-2789			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Revolving		

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 33 of 73

Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.11 Last 4 digits of account number \$1,617.00 **Comenity Bank/Carsons** 8028 Nonpriority Creditor's Name When was the debt incurred? 2014-09 PO Box 182789 Columbus, OH 43218-2789 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.12 Comenity Bank/Pier 1 Last 4 digits of account number \$623.00 0591 Nonpriority Creditor's Name When was the debt incurred? 2016-12 PO Box 182789 Columbus, OH 43218-2789 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.13 Comenity Bank/Pier 1 Last 4 digits of account number 0552 \$270.00 Nonpriority Creditor's Name When was the debt incurred? 2017-06 PO Box 182789 Columbus, OH 43218-2789 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Revolving account

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 34 of 73

Comenitybank/jcrew	Last 4 digits of account number	3701	\$1,577.0
Nonpriority Creditor's Name			φ1,577.0
	When was the debt incurred?	2016-10	
PO Box 182789			
Columbus, OH 43218-2789  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	er chock an mar apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset?			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Revolving	account	
Comenitybank/kay	Last 4 digits of account number	6298	\$598.0
Nonpriority Creditor's Name	When was the debt incurred?	2015 01	
3100 Easton Square PI	when was the debt incurred?	2015-01	
Columbus, OH 43219-6232			
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
debt Is the claim subject to offset?			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify Revolving account		
Comenitybank/Ny&Co	Last 4 digits of account number	3192	\$755.0
Nonpriority Creditor's Name	_		Ψ. σσ.σ
PO Box 182789 Columbus, OH 43218-2789	When was the debt incurred?	2015-06	
Number Street City State Zlp Code	As of the date you file, the claim is	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other Specify Revolving	account	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 35 of 73

Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.17 Last 4 digits of account number \$1,932.00 Credit One Bank NA 1389 Nonpriority Creditor's Name When was the debt incurred? 2013-06 PO Box 98875 Las Vegas, NV 89193-8875 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.18 Credit One Bank NA Last 4 digits of account number \$1,420.00 7926 Nonpriority Creditor's Name When was the debt incurred? 2014-09 PO Box 98875 Las Vegas, NV 89193-8875 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.19 Credit One Bank NA Last 4 digits of account number 3300 \$1,002.00 Nonpriority Creditor's Name When was the debt incurred? 2015-07 PO Box 98875 Las Vegas, NV 89193-8875 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Revolving account

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 36 of 73

Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.20 Last 4 digits of account number \$3,650.00 **Discover Fin Svcs LLC** 6931 Nonpriority Creditor's Name When was the debt incurred? 2016-11 PO Box 15316 Wilmington, DE 19850-5316 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.21 **Dsnb Macys** Last 4 digits of account number \$2,093.00 1060 Nonpriority Creditor's Name When was the debt incurred? 2013-07 PO Box 8218 Mason, OH 45040-8218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.22 **Dsnb Macys** Last 4 digits of account number 7853 \$1,465.00 Nonpriority Creditor's Name When was the debt incurred? 2016-06 PO Box 8218 Mason, OH 45040-8218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Revolving account

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 37 of 73

Elan Financial Service	Last 4 digits of account number	2409	\$
Nonpriority Creditor's Name			Ψ
<b>55</b> 5 400	When was the debt incurred?	2017-03	
PO Box 108 Saint Louis, MO 63166-0108			
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	,	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Revolving	account	
Illinois Department of Revenue	Last 4 digits of account number		
Nonpriority Creditor's Name	-		
100 W Dandalah Ct Cta C 200	When was the debt incurred?		
100 W Randolph St Ste C-300 Chicago, IL 60601-3218	- A - of the date was file the alaims	a. Oh ali all that are h	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
Debtor 1 only			
Debtor 2 only	☐ Contingent		
_	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
uebt Is the claim subject to offset?	■ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
— No □ Yes	Other. Specify	3	
<b>—</b> 163	Other. Specify		
Integrated Imaging Counsultants, LLC	Last 4 digits of account number		\$1,
Nonpriority Creditor's Name	- Last 4 digits of account number		<b>+</b> · · ·
	When was the debt incurred?		
PO Box 95040			
Chicago, IL 60694-5040 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	, , ,		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	and the second of the second o	
■ No	_	g plans, and other similar debts	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 38 of 73

Hill, Nicole M. Landing & Hill, Mic	helle K.	Case number (f know)	
IRS	Last 4 digits of account number		\$907.0
Nonpriority Creditor's Name			•
PO Box 219236	When was the debt incurred?		
Kansas City, MO 64121-9236			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ig plans, and other similar debts	
Yes	Other. Specify		
Kay Jewelers/Genesis	Last 4 digits of account number	4135	\$2,846.0
Nonpriority Creditor's Name	_		<del></del>
DO Dov. 4405	When was the debt incurred?	2013-02-16	
PO Box 4485 Beaverton, OR 97076-4485			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Revolving	account	
Massachusetts Dept. of Revenue	Last 4 digits of account number		\$389.1
Nonpriority Creditor's Name	When was the debt incurred?		
PO Box 7089	when was the dept incurred:		
Boston, MA 02204-7089			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐Yes	Other. Specify		
	- Guioi. Opooliy		

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 39 of 73

Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.29 Last 4 digits of account number 5051 \$2,210.00 **Merrick Bank Corp** Nonpriority Creditor's Name When was the debt incurred? 2015-02 PO Box 9201 Old Bethpage, NY 11804-9001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.30 Military Credit Services, LLC Last 4 digits of account number \$2,342.41 8001 Nonpriority Creditor's Name When was the debt incurred? 1150 E Little Creek Rd Ste 202 Norfolk, VA 23518-3826 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.31 Nordstrom/Td Bank USA Last 4 digits of account number 7770 \$7,531.00 Nonpriority Creditor's Name When was the debt incurred? 2016-12 13531 E Calev Ave Englewood, CO 80111-6504 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Revolving account

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main

Document Page 40 of 73 Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if know) Debtor 2 4.32 Last 4 digits of account number **Rush Copley Medical Center** 0299 unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 352 Aurora, IL 60507-0352 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Syncb/gap 4.33 Last 4 digits of account number 2789 \$962.00 Nonpriority Creditor's Name When was the debt incurred? 2015-07 PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.34 Syncb/jcp Last 4 digits of account number 2684 \$547.00 Nonpriority Creditor's Name When was the debt incurred? 2015-09 PO Box 965007 Orlando, FL 32896-5007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No ☐ Yes  $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving account

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 41 of 73

Syncb/lowes	Last 4 digits of account number	8378	\$844			
Nonpriority Creditor's Name	When was the debt incurred?	2017-03				
PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zlp Code	As of the date you file, the claim					
Who incurred the debt? Check one.						
☐ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Revolving	account				
Syncb/Sams Club	Last 4 digits of account number	4910	\$497			
Nonpriority Creditor's Name	- When we also debt in some 40	0047.07				
PO Box 965005	When was the debt incurred?	2017-07				
Orlando, FL 32896-5005						
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	Other. Specify Revolving	account				
Syncb/tjx Cos	Last 4 digits of account number	2744	\$1,523			
Nonpriority Creditor's Name	When was the debt incurred?	2016-06				
PO Box 965015 Orlando, FL 32896-5015	when was the dept incurred?	2010-00				
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
☐ Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte				
No	Lebis to pension of profit-sharing	y pians, and other similal debts				

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 42 of 73

Last 4 digits of account number	3408	\$1,637.0					
_		Ψ1,001.					
When was the debt incurred?	2017-08						
As of the date you file, the claim i	is: Check all that apply						
,							
☐ Debtor 1 only ☐ Contingent							
<del>-</del>							
☐ Disputed							
•	d claim:						
☐ Student loans							
Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not						
Debts to pension or profit-sharin	g plans, and other similar debts						
■ Other. Specify Revolving	account						
Last 4 digits of account number	6426	\$472.					
When was the debt incurred?	2014-03						
when was the dest mounted.	2014-03						
_							
As of the date you file, the claim i							
Who incurred the debt? Check one.  ■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated							
							_ '
•	d claim:						
<u></u>	a Claiiii.						
_	uration agreement or divorce that you did not						
report as priority claims	nation agreement of divorce that you did not						
Debts to pension or profit-sharin	g plans, and other similar debts						
Other. Specify Revolving	account						
Last 4 digits of account number	6767	\$1,382.					
When was the debt incurred?	2016-05						
	2010 00						
As of the date you file, the claim i	is: Check all that apply						
_							
<del>-</del>							
☐ Disputed							
Town of MONDENODITY							
Type of NONPRIORITY unsecured	d claim:						
Student loans							
☐ Student loans ☐ Obligations arising out of a sepa	d claim:						
Student loans	aration agreement or divorce that you did not						
	As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Debts to pension or profit-sharin Other. Specify Revolving  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Debts to pension or profit-sharin Revolving Revolving  Last 4 digits of account number When was the debt incurred?	As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Revolving account  Last 4 digits of account number As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Revolving account  Last 4 digits of account number Feroity account Contingent Cother. Specify Revolving account  Last 4 digits of account number Other. Specify Revolving account  Contingent Contingent Contingent Contingent					

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 43 of 73

4.41	US Dept of Ed/Glelsi	Last 4 digits of account number	8581	\$99,317.0				
	Nonpriority Creditor's Name	<del></del>		Ψ33,317.0				
	2401 International Ln	When was the debt incurred?	2011-03					
	Madison, WI 53704-3121							
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt	Student loans						
	Is the claim subject to offset?	Obligations arising out of a separate of	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts					
	□Yes	Other. Specify Installmen	t account					
4.42	US Dept of Ed/Glelsi	Last 4 digits of account number	0581	\$77.77 <i>4</i> .0				
4.42	Nonpriority Creditor's Name		0361	\$77,774.0				
		When was the debt incurred?	2012-07					
	PO Box 7860 Madison, WI 53707-7860							
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans						
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community							
	debt Is the claim subject to offset?		aration agreement or divorce that you did not					
	No	report as priority claims  Debts to pension or profit-sharir	ag plans, and other similar debts					
	Yes	Other. Specify Installmen						
	Li res	Other. Specify	t account					
Part 3	List Others to Be Notified About a De	ebt That You Already Listed						
is try have notif	his page only if you have others to be notified ing to collect from you for a debt you owe to a more than one creditor for any of the debts the led for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the addi or submit this page.	Parts 1 or 2, then list the collection agency had to a creditors here. If you do not have additional creditors here.	nere. Similarly, if you				
Name a	and Address	On which entry in Part 1 or Part 2 did you Line <b>4.5</b> of ( <i>Check one</i> ):	_	20				
	ox 1010	`	Part 1: Creditors with Priority Unsecured Clain Part 2: Creditors with Nonpriority Unsecured C					
	y Park, IL 60477-9110		Part 2: Creditors with Nonphority Onsecured C	Jaims				
		Last 4 digits of account number	9824					
	and Address olm S. Gerald & Assoc.	On which entry in Part 1 or Part 2 did you	_					
	S Michigan Ave Ste 600		Part 1: Creditors with Priority Unsecured Clain Part 2: Creditors with Nonpriority Unsecured C					
	ago, IL 60604-4318	Last 4 digits of account number	<ul><li>Part 2: Creditors with Nonpriority Unsecured C</li><li>7292</li></ul>	Jaims				
	and Address	On which entry in Part 1 or Part 2 did you						
Name a		· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clain	าร				
		`						
MBB PO B	ox 1219 Ridge, IL 60068-7219		Part 2: Creditors with Nonpriority Unsecured C	Claims				

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 44 of 73

Debtor 1 Debtor 2 Hill, Nicole M. Landing & Hill, Michelle K.

Case number (f know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

6a.				
ua.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f	Student loans	6f	\$	0.00
		• • •	·	0.00
6g.	Obligations arising out of a separation agreement or divorce that	6a	\$	0.00
6h.		6h.	<u>\$</u> ——	0.00
6i		6i	<u> </u>	
OI.	here.	Oi.	\$	232,183.98
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	232,183.98
	6c. 6d. 6e. 6f. 6g. 6h. 6i.	<ul> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d.  6e. Total Priority. Add lines 6a through 6d. 6e.  6f. Student loans 6f.  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6c. 6d. 6d. 6d.	6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$  6e. Total Priority. Add lines 6a through 6d.  6f. Student loans 6f. \$  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$  \$  6c. \$  \$  6d. \$  6d. \$  6e. \$  6f. \$  6g. \$  6h. \$  6h. \$  6i. \$  6t.

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main

		DOGUILLE	<u>III — Paue 45 01 7.5 — </u>	
Fill in this inform	mation to identify your	case:		
Debtor 1	Nicole M. Landin	g Hill		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle K. Hill			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	ION
Case number _				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the , Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 46 of 73 Fill in this information to identify your case: Debtor 1 Nicole M. Landing Hill Middle Name Last Name First Name Debtor 2 Michelle K. Hill Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

		our codebtor , Street, City, State a	nd ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:				
3.1	Name				☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line				
	Number City	Street	State	ZIP Code					
3.2	Name				☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line				
	Number City	Street	State	ZIP Code					

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 47 of 73

Fill	in this information to identi	ify your ca	se:								
Del	btor 1 Nico	ole M. La	nding Hill								
_	btor 2 Mich	nelle K. I	Hill								
Uni	ited States Bankruptcy Cou	urt for the:	NORTHERN DISTRIC	CT OF ILLINOIS, E	EASTERN						
	se number nown)			-			☐ An ☐ A s		d filing	g postpetition ving date:	chapter 13
0	fficial Form 106	<u> </u>					MN	// DD/ Y	YYY		
S	chedule I: You	r Inco	ome								12/15
spo atta	plying correct informatio use. If you are separated ch a separate sheet to the trial.  Describe Empl Fill in your employmen	and your is form. O	spouse is not filing wit	h you, do not inc	lude inform	atior	about yo	ur spou	se. If more	e space is ne	eded,
1.	information.	τ		Debtor 1			ı	Debtor 2	or non-fil	ling spouse	
	If you have more than one job,		Employment status	■ Employed			I	☐ Emplo	oyed		
	attach a separate page w information about addition		p.oyo	☐ Not employed			I	■ Not employed			
	employers.		Occupation	client manag	jer						
	Include part-time, season self-employed work.	nal, or	Employer's name	Alright Solut	ions						
	Occupation may include homemaker, if it applies.		r Employer's address	4 Overlook F Lincolnshire	-	-430	2				
			How long employed th	nere? 4 ye	ars			_			
Par	ft 2: Give Details Al	bout Mon	thly Income								
	mate monthly income as ss you are separated.	of the da	te you file this form. If y	ou have nothing to	report for an	y line	e, write \$0 i	n the spa	ace. Includ	e your non-fili	ng spouse
	u or your non-filing spouse ce, attach a separate sheet			oine the information	n for all empl	oyers	for that pe	erson on	the lines be	elow. If you ne	eed more
							For Debte	or 1		btor 2 or ng spouse	
2.	List monthly gross wag deductions). If not paid r				2.	\$	7,3	01.68	\$	0.00	-
3.	Estimate and list month	nly overti	me pay.		3.	+\$		0.00	+\$	0.00	-
4	Calculate grace Income	• Add line	2 1 line 2		4	٠	7 204	00		0.00	I

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 48 of 73

Deb	tor 2	Hill, Nicole M. Landing & Hill, Michelle K.	_	C	ase	e number (if known)				
				ì	Fo	r Debtor 1		r Debtor		
	Conv	y line 4 here	4.		\$	7,301.68	\$	n-filing s	0.00	-
	oop.	y line 4 here			Ψ-	7,301.00	Ψ-		0.00	<u>'</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	1,537.02	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b.		\$ -	0.00	\$_		0.00	)
	5c.	Voluntary contributions for retirement plans	5c.		\$ _	289.68	\$		0.00	)
	5d.	Required repayments of retirement fund loans	5d.		\$ _	0.00	\$		0.00	<u> </u>
	5e.	Insurance	5e.		\$ _	782.46	\$		0.00	)
	5f.	Domestic support obligations	5f.		\$ _	0.00	\$		0.00	)
	5g.	Union dues	5g.		\$ _	0.00	\$_		0.00	<u> </u>
	5h.	Other deductions. Specify: Life Insurance	5h.	+	\$	36.96	+ \$		0.00	<u> </u>
		401K Loan			\$ _	277.90	\$ _		0.00	)
		Hyatt Legal			\$_	18.76	\$		0.00	<u> </u>
		Long Term Disability			\$_	20.74	\$_		0.00	)
		401K Roth			\$_	144.84	\$		0.00	<u> </u>
		Dependent AD&D			\$_	0.90	\$		0.00	<u> </u>
		Supl AD&D			\$_	0.90	\$_		0.00	<u>)                                    </u>
		Employee Stock Purchase			\$_	51.80	\$_		0.00	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	3,161.96	\$_		0.00	<u> </u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$_	4,139.72	\$_		0.00	<u>-</u>
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.		\$-	0.00	\$-		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive			Ψ_	0.00	Ψ_		0.00	<u>_</u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		0.00	1
	8d.	Unemployment compensation	8d.		\$ \$	0.00	\$_		0.00	_
	8e.	Social Security	8e.		\$-	0.00	\$-		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			· <del>-</del>		· <u>-</u>			_
	0.0	Specify:	— 8f.		\$ \$	0.00	\$ \$		0.00	_
	8g.	Pension or retirement income Other monthly income. Specify:	8g. 8h.		ֆ \$	0.00			0.00	_
	8h.	Other monthly income. Specify.	011.	·+	Φ_	0.00	+ \$_		0.00	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_	0.00	\$_		0.0	0
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		4,139.72 + \$		0.00	= \$	4,139.72
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<b>–</b>		4,133.72 ·   +		0.00	┤¯ ゜ −	7,133.72
4.4			, _							
11.	Inclu other Do n	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your differences or relatives.  or include any amounts already included in lines 2-10 or amounts that are not avoir	epende			•			•	
	Spec	ony:					—	11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain						ies 12.	\$	4,139.72
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						Combi monthl	ned ly income
		No. Yes. Explain:								

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 49 of 73

EII	in this informa	ation to identify yo	our ocean			1		
Deb	otor 1	Nicole M. La	ınding Hi	II .		Ch∈	eck if this is:  An amended filing	
	otor 2 ouse, if filing)	Michelle K.	Hill				_	ving postpetition chapter 13 following date:
Unit	ted States Bankı	ruptcy Court for the		HERN DISTRICT OF ILLIN RN DIVISION	OIS,		MM / DD / YYYY	
1	se number (nown)							
O	fficial Fo	orm 106J						
S	chedule	J: Your	 Expen	ses				12/1
Be info	as complete a	and accurate as	possible. eded, attac	If two married people are ch another sheet to this fo				
Par 1.	t 1: Desci	ribe Your House	hold					
٠.	□ No. Go to							
	_	s Debtor 2 live i	n a separa	te household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i> a	for Separate Househ	oldof Debt	or 2.	
2.	Do you hay	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		9	Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include f people other the d your depende	nan $_{\square}$	No Yes				
exp	timate your ex		our bankru	y Expenses ptcy filing date unless yo r is filed. If this is a suppl				
val		sistance and ha		overnment assistance if and it on Schedule I: Your I			Your exp	enses
4.		or home owners		ses for your residence. In lot.	clude first mortgage	4.	\$	1,655.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	, or renter's	insurance		4b.	·	0.00
				ipkeep expenses		4c.		50.00
_		owner's associat				4d.	·	0.00
5.	Additional r	nortgage payme	ents for vo	ur residence, such as hon	ne equity loans	5.	5	0.00

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 50 of 73

Debtor 1 Debtor 2	Hill, Nicole M. Landing & Hill, Michelle K.	Case number (if known)	
6. <b>Utili</b>	ijes:		
6a.	Electricity, heat, natural gas	6a. \$	86.00
6b.	Water, sewer, garbage collection	6b. \$	98.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	200.00
6d.	Other. Specify:	6d. \$	0.00
. Foo	d and housekeeping supplies	7. \$	300.00
. Chil	dcare and children's education costs	8. \$	0.00
. Clot	hing, laundry, and dry cleaning	9. \$	75.00
0. <b>Pers</b>	onal care products and services	10. \$	0.00
1. Med	ical and dental expenses	11. \$	225.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12. \$	125.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
4. Cha	ritable contributions and religious donations	14. \$	0.00
5. <b>Ins</b> u	rance. ot include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	144.00
	Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Spe	cify:	16. \$	0.00
	allment or lease payments:  Car payments for Vehicle 1	17a. \$	539.00
	Car payments for Vehicle 2	17b. \$	527.00
	Other. Specify:	176. \$ 17c. \$	
	Other. Specify:	176. \$ 17d. \$	0.00
	· · ·	· <u></u>	0.00
	r payments of alimony, maintenance, and support that you did not repo acted from your pay on line 5, Schedule I, Your Income (Official Form 1		0.00
	er payments you make to support others who do not live with you.	\$	0.00
Spe		19.	0.00
	er real property expenses not included in lines 4 or 5 of this form or on		
	Mortgages on other property	20a. \$	0.00
20b	Real estate taxes	20b. \$	0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$	0.00
20d	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e.	Homeowner's association or condominium dues	20e. \$	0.00
1. <b>Oth</b>	er: Specify: Student Loans	21. +\$	442.00
2. Calo	ulate your monthly expenses		
	Add lines 4 through 21.	\$	4,466.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2 \$	
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	4,466.00
3. Cald	ulate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,139.72
23b	Copy your monthly expenses from line 22c above.	23b\$	4,466.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	-326.28
For e	<b>YOU EXPECT AN INCREASE OF DECREASE IN YOUR EXPENSES WITHIN THE YEAR AF</b> A your expect to finish paying for your car loan within the year or do you experication to the terms of your mortgage?  O.		decrease because of a

				_
Fill in this inform	mation to identify your	case:		
Debtor 1	Nicole M. Landin	ng Hill		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Michelle K. Hill First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
If two married pe You must file this obtaining money	ople are filing together s form whenever you fi	, both are equally responsible for le bankruptcy schedules or amer n connection with a bankruptcy c	ded schedules. Making a false sta	
Sign	n Below			
Did you pa	y or agree to pay some	one who is NOT an attorney to he	elp you fill out bankruptcy forms?	
■ No				
☐ Yes. N	Name of person			Bankruptcy Petition Preparer's Notice, tion, and Signature (Official Form 119)
•	Ity of perjury, I declare e true and correct.	that I have read the summary and	schedules filed with this declara	tion and
X /s/ Nice	ole M. Landing Hill		X /s/ Michelle K. Hill	
Nicole	M. Landing Hill		Michelle K. Hill	
Signatui	re of Debtor 1		Signature of Debtor 2	
Date _	April 2, 2018		Date <b>April 2, 2018</b>	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main

	Casc 10-09022	Docume Docume			
Fill in this	information to identify you	r case:			
Debtor 1	Nicole M. Landi	ng Hill			
	First Name	Middle Name	Last Name	)	
Debtor 2	Michelle K. Hill				
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	<u> </u>	
Case numl	ber			☐ Check if this	s is an
				amended fil	ing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	245,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	49,214.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	294,214.00
Pai	rt 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	250,746.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	232,183.98
	Your total liabilities	\$	482,929.98
Pai	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,139.72
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,466.00
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	ıles.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	ersonal, fa	mily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo	x and sub	mit this form to the

court with your other schedules.

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 53 of 73

Debtor 1
Debtor 2
Hill, Nicole M. Landing & Hill, Michelle K.

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,301.68

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Ħ	l in this infor	mation to identify your	case:				
De	ebtor 1	Nicole M. Landi	na Hill				
		First Name	Middle Name		Last Name		
	ebtor 2 ouse if, filing)	Michelle K. Hill First Name	Middle Name		Last Name		
		ankruptcy Court for the:	NORTHERN DISTR		IOIS, EASTERN DIV	ISION	
UI	inted States D	ankruptcy Court for the.	NORTHERN DISTR	ICT OF ILLIN	IOIS, LASTERN DIVI	- ISION	
	ase number (nown)					_	heck if this is an mended filing
		orm 107 t of Financial	Affairs for Ind	ividuals	Filing for B	ankruptcy	4/16
info (if I	ormation. If r	nore space is needed, a ver every question.	attach a separate shee	t to this form	. On the top of any a	qually responsible for supply additional pages, write your r	
Fa	•	Details About Your Ma		You Livea E	serore		
1.	What is you	ur current marital statu	<b>5</b> ?				
	■ Marrie □ Not ma						
2.	During the	last 3 years, have you	ived anywhere other the	han where yo	ou live now?		
	■ No □ Yes. Li	st all of the places you liv	ed in the last 3 years. Do	o not include v	vhere you live now.		
	Debtor 1 P	rior Address:	Dates Debt	or 1 lived	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> sta						y property state or territory? co, Texas, Washington and Wis	
	■ No						
	_	ake sure you fill out Sche	edule H: Your Codebtors	(Official Forn	n 106H).		
Pa	rt 2 Expla	ain the Sources of You	Income				
	-/						
4.	Fill in the to	ve any income from em tal amount of income you ng a joint case and you h	received from all jobs	and all busine	esses, including part-t		ar years?
	□ No						
	Yes. F	ill in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calenda anuary 1 to D	ar year: ecember 31, 2017 )	■ Wages, commission bonuses, tips	ns,	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a busine	ss		☐ Operating a business	

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 55 of 73

Dobtor 1	Document	Page 55 01 73
Debtor 1	I III Alicale BA I andiene O I III BAichelle I/	
Debtor 2	Hill, Nicole M. Landing & Hill, Michelle K.	Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$115,220.00	■ Wages, combonuses, tips	nmissions,	\$0.00
				☐ Operating a business		☐ Operating a	business	
5.	Include incother public you are filing.  List each some No	come regard c benefit paying a joint car source and the	less of whether yments; pensi se and you ha	e during this year or the two er that income is taxable. Exam ons; rental income; interest; di we income that you received to me from each source separate	ples of other income are aliividends; money collected frogether, list it only once under	mony; child support; om lawsuits; royalties r Debtor 1.	; and gamblir	, , ,
	☐ Yes.	Fill in the de	etails.					
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
		■ No.	O - +- 1:	,				
		Yes		each creditor to whom you paid or domestic support obligations				
	Creditor'	s Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in which you business y	clude your re are an office ou operate a	elatives; any g er, director, pe as a sole prop	bankruptcy, did you make a eneral partners; relatives of an erson in control, or owner of 20' rietor. 11 U.S.C. § 101. Include	a payment on a debt you o y general partners; partnersh % or more of their voting sec	wed anyone who whips of which you are curities; and any man	e a general pa aging agent,	artner; corporations of including one for a
			ents to an ins					
	Insider's	Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Reason fo	or this payment
8.	Within 1 y	ear before	you filed for	bankruptcy, did you make a	any payments or transfer a	any property on ac	count of a d	ebt that benefited an

insider? Include payments on debts guaranteed or cosigned by an insider.    No	Debtor 1	Case 18-09022 Duc 1		Page 56 of 73		os Desc	Main
Include payments on debts guaranteed or cosigned by an insider.    No   Yes. List all payments to an insider   Insider's Name and Address   Dates of payment   Total amount   paid   amount   you   Reason for this payment   Include creditor's name   Part 4: Identify Legal Actions, Repossessions, and Foreclosures		Hill, Nicole M. Landing & Hill, N	ichelle K.	Case	e number (if known)		
Yes. List all payments to an insider   Insider's Name and Address   Dates of payment   Total amount paid   Amount you still owe   Include creditor's name			ned by an insider.				
Part 4: Identify Legal Actions, Repossessions, and Foreclosures  9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modificat and contract disputes.    No		• • •					
9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifical and contract disputes.  No Yes. Fill in the details.  Case title Case number  10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levier Check all that apply and fill in the details below.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.  Creditor Name and Address Describe the action the creditor took Date action was An taken  An taken  Less that year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?	Inside	der's Name and Address	Dates of payment		•		
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifical and contract disputes.    No	Part 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
Yes. Fill in the details.   Case title   Case number   Court or agency   Status of the case	List all	ll such matters, including personal injury o					
Case number  10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied Check all that apply and fill in the details below.    No. Go to line 11.	_						
Check all that apply and fill in the details below.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address  Describe the Property Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  Creditor Name and Address  Describe the action the creditor took Date action was taken  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?			Nature of the case	Court or agency		Status of the	case
□ Yes. Fill in the information below.       Creditor Name and Address       Describe the Property Explain what happened       Date       Value of prosection prosection.         11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt?       No       Date action was taken         □ No       Yes. Fill in the details.       Describe the action the creditor took       Date action was taken       An taken         12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?       No         □ No       Yes         Part 5: List Certain Gifts and Contributions         13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?				rty repossessed, for	reclosed, garnish	ed, attached, so	eized, or levied?
Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  Creditor Name and Address  Describe the action the creditor took Date action was taken  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	_						
Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from you accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  Creditor Name and Address  Describe the action the creditor took Date action was taken  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	Credi	litor Name and Address	Describe the Property		Date		Value of the property
accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.  Creditor Name and Address  Describe the action the creditor took  Date action was taken  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No			Explain what happened				
Creditor Name and Address  Describe the action the creditor took  Date action was taken  12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No	accou	unts or refuse to make a payment beca No		uding a bank or fina	ncial institution, s	set off any amo	ounts from your
<ul> <li>12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No</li> </ul>			Describe the action the	creditor took	Date a	action was	Amoun
court-appointed receiver, a custodian, or another official?  No Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No					taken		
Yes  Part 5: List Certain Gifts and Contributions  13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No				rty in the possessio	n of an assignee	ior the benefit	of creditors, a
13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No	_	• •					
■ No	Part 5:	List Certain Gifts and Contributions					
	■ N		cy, did you give any gifts	with a total value o	f more than \$600	per person?	
Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts		•	er Describe the gifts				Value
Person to Whom You Gave the Gift and Address:							
<ul> <li>14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charing No</li> <li>☐ Yes. Fill in the details for each gift or contribution.</li> </ul>	■ N	No		or contributions wi	ith a total value of	more than \$60	00 to any charity?

Gifts or contributions to charities that total more than \$600 **Charity's Name** 

Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed Value

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Entered 04/02/18 10:45:53 Case 18-09622 Doc 1 Filed 04/02/18 Desc Main Page 57 of 73 Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Describe the property you lost and Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Date payment or Person Who Was Paid Description and value of any property Amount of **Address** transferred transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 0.00 Jordan Legal Group \$0.00 1999 W Galena Blvd Ste B Aurora, IL 60506-4305 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of payment Address transferred transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Person Who Received Transfer Date transfer was

Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

made

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details.

Name of trust

Description and value of the property transferred

**Date Transfer was** made

Dah	44	Case 18-09622	Doc 1	Filed 04/02/18 Document	Entered Page 58		.8 10:45:53	Desc M	1ain
Deb Deb	tor 1	Hill, Nicole M. Landin	g & Hill, M	ichelle K.		Case nur	mber (if known)		
		<b>.</b>							
Part	8:	List of Certain Financial A	Accounts, Ins	struments, Safe Deposit	Boxes, and S	torage Units	<u> </u>		
	sold, Inclu hous	in 1 year before you filed for , moved, or transferred? , de checking, savings, mon ses, pension funds, coopera No	ey market, o	r other financial accour	nts; certificate	s of deposit	•		
		Yes. Fill in the details.							
		ne of Financial Institution a Iress (Number, Street, City, State a e)		Last 4 digits of account number	Type of accinstrument		Date account w closed, sold, moved, or transferred		ast balance before closing or transfer
		ou now have, or did you ha n, or other valuables?	eve within 1 y	ear before you filed for	bankruptcy, a	any safe dep	oosit box or other	depository	for securities,
		No							
		Yes. Fill in the details.							
		ne of Financial Institution dress (Number, Street, City, State a	and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe	e the contents		Do you still have it?
22.	Have	e you stored property in a s	torage unit o	or place other than your	home within	1 year befor	e you filed for bar	nkruptcy?	
	_	Ma							
	=	No Yes. Fill in the details.							
	Nam	ne of Storage Facility dress (Number, Street, City, State a	and ZIP Code)	Who else has or to it? Address (Number, and ZIP Code)		Describe	e the contents		Do you still have it?
Part	9:	Identify Property You Hol	d or Control	for Someone Else					
23.	Do y	ou hold or control any propeone.			ıde any prope	rty you borr	rowed from, are st	oring for, o	r hold in trust for
		No							
		Yes. Fill in the details.							
		ner's Name dress (Number, Street, City, State a	and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	e the property		Value
Part	10:	Give Details About Enviro	onmental Info	ormation					
For t	he pı	urpose of Part 10, the follow	vina definitio	ons apply:					
_		<b>, p</b>	g	арр.у.					
	toxic	ironmental law means any f c substances, wastes, or ma rolling the cleanup of these	aterial into th	e air, land, soil, surface					
		means any location, facility , operate, or utilize it, includ			environmental	law, whether	er you now own, o	perate, or u	ıtilize it or used to
		ardous material means anyt erial, pollutant, contaminant	_		as a hazardou	s waste, haz	zardous substance	e, toxic sub	stance, hazardous
Repo	ort all	I notices, releases, and pro-	ceedings tha	it you know about, rega	rdless of whei	n they occu	rred.		

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

_	NO					
	Yes. Fill in the details.					
Name of site						

Address (Number, Street, City, State and ZIP Code)

Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it

Date of notice

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Page 59 of 73 Document Debtor 1 Hill, Nicole M. Landing & Hill, Michelle K. Case number (if known) Debtor 2 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicole M. Landing Hill /s/ Michelle K. Hill Nicole M. Landing Hill Michelle K. Hill Signature of Debtor 1 Signature of Debtor 2 Date April 2, 2018 **Date** April 2, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Yes. Name of Person

Official Form 107

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 60 of 73

Fill in this information to identify your case:				
Debtor 1	Nicole M. Landing Hill			
Debtor 2 (Spouse, if filing	Michelle K. Hill			
United States Bankruptcy Court for the:		Northern District of Illinois, Eastern		
Case number (if known)				

Check the appropriate box as directed in lines 40 or 42:				
According to the calculations required by this Statement:				
■ 1. There is no presumption of abuse.				
☐ 2. There is a presumption of abuse.				
☐ Check if this is an amended filing				

### Official Form 122A - 2

### **Chapter 7 Means Test Calculation**

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	1: Determine Your Adjusted Income						
1.	Copy your total current monthly income.	Copy line 11 fror	n Official For	m 122A-1 h	ere=>	\$	7,301.68
2.	Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.  ☐ Yes. Is your spouse Filing with you?  ☐ No. Go to line 3.  ☐ Yes. Fill in \$0 the total on line 3.						
3.	Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow the On line 11, Column B of Form 122A-1, was any amount of the you or your dependents?  No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:	hese steps:		·		or the hou	sehold expenses o
	State each purpose for which the income was used. For example, the income is used to pay your spouse's to support other than you or your dependents.	ax debt or to	Fill in the a are subtrayour spours				
	Total		\$	0.00 Co	ppy total here	}=> <b>-</b> \$	0.00
4.	Adjust your current monthly income. Subtract line 3 from	line 1.				\$_	7,301.68

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 61 of 73

Debtor 1 Debtor 2 Hill, Nicole M. Landing & Hill, Michelle K.

Case number (if known)

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2 Living 0 Housing

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,132.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$

49

7b. Number of people who are under 65

**2** 

7c. **Subtotal.** Multiply line 7a by line 7b.

98.00

Copy here=> \$ 98.00

#### People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

**\$**\_\_\_\_\_117\_

7e. Number of people who are 65 or older

X \_\_\_\_\_0

7f. Subtotal. Multiply line 7d by line 7e.

\$ 0.00

Copy here=> +\$ 0.00

7g. Total. Add line 7c and line 7f

\$\_\_\_\_\_98.00

Copy total here=>

\$ 98.00

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 62 of 73

Debtor 1 Debtor 2 Hill, Nicole M. Landing & Hill, Michelle K.

Loc	<b>Local Standards</b> You must use the IRS Local Standards to answer the questions in lines 8-15.							
		n information from the IRS, the U.S. Trustee Program h is into two parts:	nas divic	led the IRS Loc	cal Standar	d for housing fo	or bankruptcy	
<b>=</b> F	lousi	ng and utilities - Insurance and operating expenses						
■ F	lousi	ng and utilities - Mortgage or rent expenses						
To a	nsw	er the questions in lines 8-9, use the U.S. Trustee Prog	jram cha	art.				
		e chart, go online using the link specified in the separate	instructio	ons for this form				
This	char	t may also be available at the bankruptcy clerk's office.						
8.	B. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses							
9.	Hou	sing and utilities - Mortgage or rent expenses:						
	9a.	Using the number of people you entered in line 5, fill in the listed for your county for mortgage or rent expenses				\$1,66	65.00	
	9b.	Total average monthly payment for all mortgages and other	r debts s	ecured by your h	home.			
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.							
		Name of the creditor	Averag payme	ent monthly				
		First America Bank	\$	3,196.37				
					7			
		Total average monthly payment	\$	3,196.37	Copy here=>	-\$3,1	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.			J 		٦	
		Subtract line 9b (total average monthly paymen) from line rent expense). If this amount is less than \$0, enter \$0			\$	0.00	Copy here=> \$	0.00
10.		ou claim that the U.S. Trustee Program's division of the cts the calculation of your monthly expenses, fill in an				is incorrect and	s	0.00
	Exp	olain why:						
11.	Loc	al transportation expenses: Check the number of vehicle	s for whi	ich you claim an	ownership	or operating expe	ense.	
	■ 0. Go to line 14.							
	□ 1	. Go to line 12.						
	□ 2	or more. Go to line 12.						
12.	2. <b>Vehicle operation expense</b> : Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the <i>Operating Costs</i> that apply for your Census region or metropolitan statistical area.  • 0.00							

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 63 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

13.		ownership or lease expense: Using the IRS Local sclaim the expense if you do not make any loan or leaseles.					
Vel	hicle 1	Describe Vehicle 1:					
13a.	Ownersh	nip or leasing costs using IRS Local Standard		\$	0.00		
13b.	_	monthly payment for all debts secured by Vehicle 1. clude costs for leased vehicles.					
	contractu	late the average monthly payment here and on line lally due to each secured creditor in the 60 months af ide by 60.					
	Nar	ne of each creditor for Vehicle 1	Average monthly payment				
			\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0	), enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	hicle 2	Describe Vehicle 2:					
13d.	Ownersh	nip or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average leased ve	monthly payment for all debts secured by Vehicle 2. Enhicles.	Do not include costs for				
	Nar	ne of each creditor for Vehicle 2	Average monthly payment				
			\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease expense line 13e from line 13d. if this amount is less than \$0	), enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ransportation expense: If you claimed 0 vehicles in ration expense allowance regardless of whether you u		ocal Standards	s, fill in th <i>eub</i>	olic \$	189.00
15.	deduct a	public transportation expense: If you claimed 1 public transportation expense, you may fill in what you the IRS Local Standard for Public Transportation.	or more vehicles in line ubelieve is the appropriat	11 and if you on the expense, but	claim that you you may not	u may also claim \$	0.00

# Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 64 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Soci your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 and ne total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	1,537.02
17.	Involuntary deductions: Tunion dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, sts.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	289.68
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments or	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$ <u> </u>	0.00
20.	Education: The total month  ■ as a condition for your jo	nly amount that you pay for education that is either required: b, or		
	for your physically or me	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	any elementary or secondary school education.	\$	0.00
22.	required for the health and v	penses, excluding insurance costs: The monthly amount that you pay for health care that is velfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7.		
	Payments for health insuran	ice or health savings accounts should be listed only in line 25.	\$	0.00
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it inployer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	•	llowed under the IRS expense allowances.	\$	3,783.70
	Add lines 6 through 23.			

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 65 of 73

Debtor 1 Debtor 2

Hill, Nicole M. Landing & Hill, Michelle K.

Add	litional	Expense Deductions These are additional	l deductions	s allowed by the	Means Test.		
	Note: Do not include any expense allowances listed in lines 6-24.						
25.		insurance, disability insurance, and health nce, disability insurance, and health savings acc dents.					
	Health	insurance	\$	782.46			
	Disabi	lity insurance	\$	0.00			
	Health	savings account	+ \$	0.00			
					7		
	Total		\$	782.46	Copy total here=>	\$	782.46
	Do you	actually spend this total amount?			_		
		No. How much do you actually spend?					
		Yes	\$				
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b).						
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.						
	By law	, the court must keep the nature of these expen	ses confider	ntial.		\$	0.00
28.	Additi	onal home energy costs. Your home energy of	osts are inc	luded in your in	surance and operating expenses on line 8.		
	If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.						
		ust give your case trustee documentation of you d is reasonable and necessary.	r actual exp	enses, and you	must show that the additional amount	\$	0.00
29.	\$160.4	ation expenses for dependent children who expenses for dependent child? per child) that you pay for your dependent chatary or secondary school.					
		ust give your case trustee documentation of you able and necessary and not already accounted			must explain why the amount claimed is		
	* Subje	ect to adjustment on 4/01/19, and every 3 years	after that fo	r cases begun o	on or after the date of adjustment.	\$	0.00
30.	than th	onal food and clothing expense. The monthly ne combined food and clothing allowances in the od and clothing allowances in the IRS National	ne IRS Natio	onal Standards			
		d a chart showing the maximum additional allowers. This chart may also be available at the bank			ak specified in the separate instructions for		
	You m	ust show that the additional amount claimed is r	easonable a	and necessary.		\$	0.00
31.		nuing charitable contributions. The amount the nents to a religious or charitable organization. 20			ribute in the form of cash or financial	+\$	0.00
32.		II of the additional expense deductions. nes 25 through 31.				\$	782.46

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 66 of 73

Debtor 1 Debtor 2 Hill, Nicole M. Landing & Hill, Michelle K.

Loans on your first two vehicles:  33b. Copy line 13b here							
and other secured debt, fill in line 33 a through 33c.  To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.  Mortgages on your home:  33a. Copy line 9b here  \$\$ 3,196.3*  Loans on your first two vehicles:  33b. Copy line 13b here  \$\$ \$536.2*  33c. Copy line 13b here  \$\$ \$ \$536.2*  33d. List other secured debts:  Name of each creditor for other secured debt    Dees payment include taxes or insurance?	Deduc	tions for Debt Payment					
Mortgages on your home:    Mortgages on your home:   Average monthly payment	an	d other secured debt, fill in lines 33a	through 33e.			,	
Same and the payment				ue to eacl	n secured creditor in		
Loans on your first two vehicles:  33b. Copy line 13b here		Mortgages on your home:					
33b. Copy line 13b here   33c. Copy line 13e here   33d. List other secured debts:  Name of each creditor for other secured debt    Does payment include taxes or insurance?	33a.	Copy line 9b here			=>	\$	3,196.37
33d. List other secured debts:  Name of each creditor for other secured debt    Does payment include taxes or insurance?   No		Loans on your first two vehicles:					
33d. List other secured debts:  Name of each creditor for other secured debt    Does payment include taxes or insurance?   No	33b.	Copy line 13b here			=>	\$	536.22
No   Yes   \$   4.4	33c.					\$	442.08
Pnc Bank, N.A.  Secured property  No Yes \$ 4.49 No Yes \$ No No Yes \$ No No Yes \$ No No Yes \$ No	33d.						
Pnc Bank, N.A.  Secured property  Yes \$ 4.44  No Yes \$  No Yes \$  A,179.10  Yes \$  A,179.10  Pres A,179.1	Name o	of each creditor for other secured debt	Identify property that secures the debt		include taxes or		
Pnc Bank, N.A.  Secured property  Yes \$ 4.44  No Yes \$  No Yes \$  33e. Total average monthly payment. Add lines 33a through 33d  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  Amonthly cure amount  Total cure amount  Total cure amount  No. Go to line 36.					■ No		
33e. Total average monthly payment. Add lines 33a through 33d \$ 4,179.10   Yes \$ \$ \$ 4,179.10   Yes \$ \$ \$ 4,179.10   Yes \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Pnc Bank. N.A.	Secured property		_	¢	4.43
33e. Total average monthly payment. Add lines 33a through 33d  \$ 4,179.10 Copy total here=> \$ 4,179.  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount)</i> . Next, divide by 60 and fill in the information below.  Name of the creditor Identify property that secures the debt Total cure amount  -NONE-  \$ ÷60 = \$  Total  \$ 0.00 Copy total here=> \$  No. Go to line 36.	-					Φ.	
33e. Total average monthly payment. Add lines 33a through 33d  \$ 4,179.10   Copy total here=> \$ 4,179.3  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount amount   Total cure amount    -NONE-   \$ ± 60 = \$    Total   \$ 0.00   Copy total here=> \$    Total   \$ 0.00   Copy total here=> \$    No. Go to line 36.							
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33e. Total average monthly payment. Add lines 33a through 33d  \$ 4,179.10   here=> \$ 4,179.0  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE-	-					.Ψ.	
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are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.			Т	otal \$			\$ 0.00
are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.							
_ ````				that			
☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing		No. Go to line 36.					
priority claims, such as those you listed in line 19.				or ongoin	g		
Total amount of all past-due priority claims \$ \$ \( \text{0.00} \) \( \ddot 60 = \\$		Total amount of all past-due p	riority claims	. \$_	0.00 ÷	60 =	\$0.00

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 67 of 73

Debtor 1 Debtor 2	lill, Nicole M. Landing & Hill, Michelle K.	— age	Case n	umber ( <i>if known</i>			
For m	<b>You eligible to file a case under Chapter 13?</b> 11 U.S.C. § 10 nore information, go online using the link fo <i>Bankruptcy Basics</i> ctions for this form. <i>Bankruptcy Basics</i> may also be available a	s specified in		ce.			
■ N	o. Go to line 37. es. Fill in the following information.						
	Projected monthly plan payment if you were filing under C	hanter 13	\$				
	Current multiplier for your district as stated on the list issu Administrative Office of the United States Courts (for dis	ued by the stricts in Ala	bama				
	and North Carolina) or by the Executive Office for United all other districts).	States Trus	tees (for X				
To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.						y total	
	Average monthly administrative expense if you were filing	under Chap	oter 13	\$		e=> \$	
	all of the deductions for debt payment. lines 33e through 36.					\$	4,179.10
Total Dec	ductions from Income						
38. <b>Add a</b>	all of the allowed deductions.						
	y line 24,All of the expenses allowed under IRS ense allowances	\$	3,783.70				
Cop	y line 32, All of the additional expense deductions	\$	782.46				
Cop	y line 37, All of the deductions for debt payment	+\$	4,179.10	٦			
	Total deductions	\$	8,745.26	Copy total	here=	> \$	8,745.26
Part 3:	Determine Whether There is a Presumption of Abuse						
39. Calcu	ulate monthly disposable income for 60 months						
39a.	Copy line 4, adjusted current monthly income	\$	7,301.68				
39b.	Copy line 38,Total deductions	-\$	8,745.26	7			
39c.	Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a	\$	0.00	Copy here=>\$		0.00	
For t	the next 60 months (5 years)			_	x 60		
	. <b>Total.</b> Multiply line 39c by 60		\$	0.00	Copy here=>	\$	0.00
40. <b>Find</b>	out whether there is a presumption of abuse. Check the b	ox that app	lies:		ı	L	
■ т	he line 39d is less than \$7,700*. On the top of page 1 of this	form, check	k box 1, <i>There i</i> s	no presump	tion of abus	e. Go to Part 5	i.
□т	he line 39d is more than \$12,850*. On the top of page 1 of the you claim special circumstances. Go to Part 5.						

☐ The line 39d is at least \$7,700\*, but not more than \$12,850\*. Go to line 41.

\*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 68 of 73

Case number	er (if known)	
	.25	
	Copy here=	\$
ting all allowed deductions is	enough to pay 25%	
n, check box 1, There is no pre	sumption of abuse.	
	nere is a presumption of	
average monthly expense or inc	ome adjustment for each	n item.
	•	
\$		
\$		
\$		
nation on this statement and in a	iny attachments is true an	nd correct.
X /s/ Michelle K. Hi	II	
Michelle K. Hill Signature of Debtor 2		
tise S c rri ge	and debt. If you filled out A tistical Information e 3b on that form.  S.C. § 707(b)(2)(A)(i)(I)  cting all allowed deductions is rm, check box 1, There is no present the present of the	tistical Information e 3b on that form.  41a. \$

Date <u>April 2, 2018</u> MM / DD / YYYY Date **April 2, 2018** 

MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-09622 Doc 1 Filed 04/02/18 Entered 04/02/18 10:45:53 Desc Main Document Page 73 of 73

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re	Hill, Nicole M. Landing & Hill, Michelle K.		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATT	ORNEY FOR DE	EBTOR
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing one rendered on behalf of the debtor(s) in contemplation of contemplation.	of the petition in bankrupto	cy, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	0.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	0.00
2. Т	The source of the compensation paid to me was:			
	$\blacksquare$ Debtor $\square$ Other (specify):			
3. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensifirm.	sation with any other perso	on unless they are memb	pers and associates of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
1	a. Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors d. [Other provisions as needed]	ent of affairs and plan whi	ch may be required;	
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fee de	loes not include the following	ing service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement of any a ankruptcy proceeding.	greement or arrangement f	for payment to me for re	presentation of the debtor(s) in
Α	pril 2, 2018	/s/ Darrell Jorda	n	
Date		Darrell Jordan		
		Signature of Attorr Jordan Legal Gi		
		1999 W Galena I Aurora, IL 60506		
		djordan@djorda	anlegal.com	